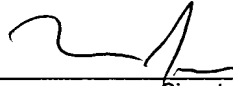


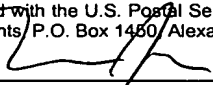


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PTO/SB/31 (08-03)  
Approved for use through 07/31/2006. OMB 0651-0001  
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) TESSERA 3.0-085 CONT DIV CIP	
In re Application of Joseph Fjelstad			
Application Number 09/732,821		Filed December 8, 2000	
For METHODS FOR MANUFACTURING RESISTORS USING A SACRIFICIAL LAYER			
Art Unit 2827		Examiner A. Chambliss	
<p>Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>330.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>12-1095</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>I am the</p> <p><input type="checkbox"/> applicant /inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>28,241</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p>Signature: <u></u> Signature _____ Typed or printed name _____ Marcus J. Millet _____ (908) 654-5000 Telephone number _____ December 18, 2003 Date</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p> <p><input type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>			

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS AF, Commissioner for Patents/P.O. Box 1460, Alexandria, VA 22313-1450, on the date shown below.	
Dated: December 18, 2003	Signature: <u></u> (Marcus J. Millet)

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